TENNESSEE GENERAL ASSEMBLY FISCAL REVIEW COMMITTEE



FISCAL NOTE

HB 1920 - SB 2292

February 9, 2014

SUMMARY OF BILL: Prohibits a health care provider or institution, and no health care service plan, insurer issuing disability insurance, self-insured employee welfare benefit plan, or nonprofit hospital plan from requiring the issuance, execution, or revocation of an organ donation consent form or advance directive as a condition for being insured for, or receiving health care.

ESTIMATED FISCAL IMPACT:

NOT SIGNIFICANT

Assumptions:

- Currently, no health care provider or institution, or insurance plan can require the execution or revocation of an advanced directive before providing care or insurance to an individual. This would place the same prohibition on the requirement of an organ donation consent form.
- According to the Department of Finance and Administration, Benefits Administration, this will have no effect on insurance plans administered by the Department.
- According to the Department of Health, any rulemaking required by the Board for Licensing Health Care Facilities can be accomplished within existing resources during regular meetings.
- Pursuant to § 4-29-121, all health-related boards are required to be self-supporting over a two-year period. The Board for Licensing Health Care Facilities had closing balances of \$450,785 in FY11-12, and \$599,456 in FY12-13.

IMPACT TO COMMERCE:

NOT SIGNIFICANT

Assumption:

• Specifying that organ donation consent forms should be treated the same as an advanced directive will not significantly affect the number of organ donations in the state; therefore, this will not cause a significant fiscal impact to commerce or jobs in this state.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.

Lucian D. Geise, Executive Director

/jdb